



Patent

Attorney Docket No. 1011350-000329

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

~~Ex~~ re Patent Application of

Masakatsu Kiwada

Application No.: 10/800,873

Filing Date: March 16, 2004

Title: IMAGE FORMING DEVICE, IMAGE FORMING METHOD, IMAGE FORMING PROGRAM, COMPUTER READABLE RECORDING MEDIUM ON WHICH THE PROGRAM IS RECORDED

MAIL STOP AMENDMENT

Group Art Unit: 2625

Examiner: IRIANA CRUZ

Confirmation No.: 1558

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is enclosed.
- ☐ _____ Terminal Disclaimer(s) and the ☐ \$ 65 ☐ \$ 130 fee per Disclaimer due under 37 C.F.R. § 1.20(d) are enclosed.
- ☐ Also enclosed is/are: _____
- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$ 405 ☐ \$ 810 fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.
- ☐ Applicant(s) previously submitted _____ on _____ for which continued examination is requested.
- ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below:

| AMENDED CLAIMS | | | | | |
|--|---------------|---|--------------|-----------------|----------------|
| | No. of Claims | Highest No. of Claims Previously Paid For | Extra Claims | Rate | Additional Fee |
| Total Claims | 18 | 20 | 0 | x \$ 50 (1202) | \$ 0 |
| Independent Claims | 9 | 9 | 0 | x \$ 210 (1201) | 0 |
| <input type="checkbox"/> If Amendment adds multiple dependent claims, add \$ 370 (1203) | | | | | \$ 0 |
| Total Claim Amendment Fee | | | | | \$ 0 |
| <input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee | | | | | 0 |
| TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT | | | | | \$ 0 |


- ☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.
- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☐ Charge _____ to credit card for the fee due. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date May 29, 2008

By:



William C. Rowland
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Patent
Attorney's Docket No. 1011350-000329

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|----------------------------------|---|----------------------------|
| In re Patent Application of |) | MAIL STOP AMENDMENT |
| Masakatsu Kiwada |) | |
| Application No.: 10/800,873 |) | Group Art Unit: 2609 |
| Filed: March 16, 2004 |) | Examiner: IRIANA CRUZ |
| For: IMAGE FORMING DEVICE, IMAGE |) | Confirmation No.: 1558 |
| FORMING METHOD, IMAGE |) | |
| FORMING PROGRAM, COMPUTER |) | |
| READABLE RECORDING MEDIUM |) | |
| ON WHICH THE PROGRAM IS |) | |
| RECORDED |) | |

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated February 29, 2008, please amend the
above-identified patent application as follows: